

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/587, 212

FILING DATE

7-25-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		3				
5		3				
6		①				
7		1				
8		1				
9		1				
10		①				
11		1				
12		①				
13		①				
14		①				
15	1					
16		1				
17		1				
18		1				
19		4				
20		4				
21		①				
22		1				
23		①				
24		①				
25		①				
26	1					
27		1				
28		2				
29		2				
30		①				
31	1					
32		1				
33		2				
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48						
49						
50						
TOTAL IND.	4	↓		↓		↓
TOTAL DEP.	42	←		←		←
TOTAL CLAIMS	46					

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						